City of Winchester 15 N. Cameron Street Winchester, VA 22601 FAX: (540) 722-3618

MECHANICAL PERMIT APPLICATION		PERMIT NO	
Fees Eff: October 8, 2002		DATE ISSUED	
CONTRACTOR		BUILD	ING
		USE: _	
JOB LOCATION		ESTIMA	ATED E\$
PROPERTY OWNER/LESSEE			(materials & labor) This job only
If applicable, indicate how many &	z size of EACH unit:	========	=======
in applicable, maleure now many ex		r () OIL	
		FURNACES	REFRIGERATION
HEAT PUMPS & AIR CONI	D. BTU'S	BTU'S	SYSTEMS
()T	()()	()T
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()T	D. BIU'S ())	()T
		- 	. ,
*OFFICE USE ONLY on the follow	_		
*Heat Pumps &	unit (s) @ \$30 p/5T		\$
Air Conditioners:	ton (s) \$10 ea additie		
	over 5T p/u (\$240 ma		\$
*Boilers and Furnaces:	unit (s) @ \$30 p/unit	t to 100,000	\$
	BTU's @ \$10 ea add	itional 100,000	
	BTU's p/u (\$ 240 ma	uximum p/u)	\$
*Refrigeration Systems:	unit (s) @ \$50 p/5T u		\$
-	ton (s) @ \$10 ea add		
	over 5T p/u		\$
			========
OTHER ITEMS	fill in Quantity only		
Fire Dampers:		@ \$ 5.00 each	\$
Crematorium:		@ \$80.00 each	\$
Incinerators:		@ \$80.00 each	\$
Commercial Range Hoods		@ \$50.00 each	\$
Oil Burner Conversion:		@ \$60.00 each	\$
Oil Burner Replacement:		@ \$60.00 each	\$ \$
SHOW OTHER WORK NOT SE		5.00 per \$1000	¥
Est. value of that work		.00 Minimum)	\$
			Ψ
PLUS BASE FEE (indicate number	er units/floors)		
Residential BASE FEE:		unit	¢
	unit(s) @ \$20 p/v		Ф
Nonresidential BASE FEE:	unit(s) @ \$30 p/t		Φ
1750/ 04-4-0 1 0	a dua an total for our	FEE AMOUNT	⊅
1.75 % State Surcharge fee		EEE AMOUNT	Ф
	? TOTAL	. FEE AMOUNT	\$
NEW WORK REPLACEMI			
NEI LACEVII	LIVE WORK ALLICAL	LE CODE	CODE TEAK
2 sets of plans required on No	onresidential NEW or RELOC	ATED items and	approved before
	issued No plans required		approved before
permit is	issued ivo pians required	on Residential	
I honoby agree to comply with all	nyovicions of Uniform State	ido Building Code	the Zoning
I hereby agree to comply with all			
Ordinance and other ordinances	or poncies as adopted by the C	nty of winchester,	v irginia.
Signature of Applicant	Date	Te	lephone Number
Printed Name of Applicant	_		
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